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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6393

From: Account Name : SHUMAKER, LOOP & KENDRICK LLP
Account Number : 075500004387
Phone : (813) 229-7600
Fax Number : (813) 229-1660

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: jmerkle1@tampabay.rr.com

FLORIDA LIMITED LIABILITY CO.
Merklan LLC

Certificate of Status	0
Certified Copy	1
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JUL 19 2011

EXAMINER

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**Articles of Organization
Of
Merklan LLC**

ARTICLE I – Name:

The name of the limited liability company is Merklan LLC.

ARTICLE II – Address:

The street and mailing address of the principal office of the limited liability company is:

912 Kingscote Court
Safety Harbor, Florida 34695

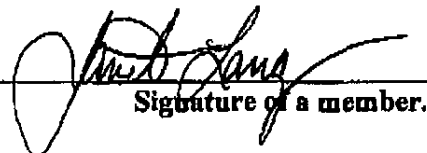
ARTICLE III – Managing Member:

The name and address of the managing member is:

Janet Lang
912 Kingscote Court
Safety Harbor, Florida 34695

IN WITNESS WHEREOF, I have signed these Articles of Organization as a member and acknowledged them to be my act this 18th day of July 2011.

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2011 JUL 18 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Signature of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Janet Lang
Typed or printed name of signee

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is **Merklan LLC.**
2. The name and the Florida street address of the registered agent are:

Janet Lang
912 Kingscote Court
Safety Harbor, Florida 34695

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Janet Lang,
Registered Agent

21 JUL 18 AM 09:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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